

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title Line One::	INSULATED CONCRETE FORM AND
Title Line Two::	WELDED WIRE FORM TIE
Attorney Docket Number::	31118-US-03
Request for Early Publication?::	No
Request for Non- Publication?::	No
Suggested Drawing Figure::	3
Total Drawing Sheets::	11
Small Entity?::	Yes
Petition Included?::	No

APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	US
Status::	Full Capacity
Given Name::	JERRY
Middle Name::	D.
Family Name::	COOMBS
City of Residence::	WYLIE
State or Province of Residence::	TX
Country of Residence::	US
Street of Mailing Address::	1710 STONECREST TRAIL
City of Mailing Address::	WYLIE
State or Province of	
Mailing Address::	TX
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	75098
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	US
Status::	Full Capacity
Given Name::	ANDREW
Middle Name::	M.
Family Nam ::	HORGAN
City of R sid nc ::	DURHAM

State or Province of Residence::	NC
Country of Residence::	US
Street of Mailing Address::	1009 GREEN STREET
City of Mailing Address::	DURHAM
State or Province of Mailing Address::	NC
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	27701
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	DAVID
Middle Name::	W.
Family Name::	WATSON
City of Residence::	TIJERAS
State or Province of Residence::	NM
Country of Residence::	US
Street of Mailing Address::	BOX 176
City of Mailing Address::	TIJERAS
State or Province of Mailing Address::	NM
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	87059
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	PATRICK
Middle Name::	C.
Family Name::	MURPHY
City of Residence::	ALBUQUERQUE
State or Province of Residence::	NM
Country of Residence::	US
Street of Mailing Address::	4527 SUNNINGDALE AVE., N.E.
City of Mailing Address::	ALBUQUERQUE
State or Province of Mailing Address::	NM
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	87110

CORRESPONDENCE INFORMATION

Correspondence Customer

No.:: 005179
Phone Number:: (505) 998-1500
Fax Number:: (505) 243-2542
E-Mail Address:: SSLUSHER@peacocklaw.com

REPRESENTATIVE INFORMATION

Representative Customer

Number:: 005179

DOMESTIC PRIORITY INFORMATION

Application:: This Application
Continuity Type:: An application Claiming the Benefit Under
35 USC 119(e)
Parent Application:: 60/408859
Parent Filing Date:: 09/05/02

ASSIGNEE INFORMATION

Assignee Name:: AMERICAN POLYSTEEL, LLC
Street of Mailing Address:: 5150-F EDITH BOULEVARD, N.E.
City of Mailing Address:: ALBUQUERQUE
State or Province of Mailing Address: NM
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 87107